

Facsimile Transmission Form

To:

RECEIVED
CENTRAL FAX CENTER
MAR 24 2005

From:

Message: fax

Approved for use through 10/31/2002, OMB 0651-0035
 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/648,499
	Confirmation No.	4213
	Filing Date	August 25, 2003
	First Named Inventor	Robbert C. Van Der Linden
	Art Unit	2171
	Title: Method and System for Utilizing a Cache for Path-Level Access Control to Structured Documents Stored in a Database	

RECEIVED
 CENTRAL FAX CENTER
 MAR 24 2005

Please change the Correspondence Address for the above-identified application to:

☒ Customer Number

45728

Type Customer Number here

OR

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City		State	ZIP	
Country				
Telephone		Fax		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or Agent of record.

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed

Name: Ingrid Foerster, Reg. No.: 36,511

Signature

Date

3/15/05

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 3 forms are submitted.

Attorney Docket No: SVI.920030052US1